## PART B - FEE(S) TRANSMITTAL

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,						Falle	K. Jan Wa	(Signature)	
	02 FC:1504 300.00 OP					May 11, 200	06	(Date)	
	APPLICATION NO.	00 1010001			NVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	10/005,643	12/05/2001		II.	M01059.70000US	8242			
T	TITLE OF INVENTION: SWIPED APERTURE CAPACITIVE FINGERPRINT SENSING SYSTEMS AND METHODS								
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The state of the s	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE PU		IBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	YES	\$700			\$300	\$1000	06/30/2006	
	EXAM	MINER ART UNIT		IT	CL	ASS-SUBCLASS			
A	CARTER, AARON W 2624					382-124000			
i. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list									
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	Address form PTO/SB/122) attached. (2) the n				e name of a single firm (having as a member a 2				
	PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered pa					ey or agent) and the names of up to intattorneys or agents. If no name is 3			
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Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).									
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Typed or printed name William R. McClellan Registration No. 29,409									
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